



**ACCOUNTING OF RECORDS/INFORMATION DISCLOSURE  
UNDER PRIVACY ACT**

1. FILE RECORD NO. *(If applicable)*

2. NAME OF INDIVIDUAL TO WHOM THE RECORD/INFORMATION PERTAINS

3. DATE OF DISCLOSURE

4. NATURE OF DISCLOSURE *(Include brief description of each type of document/record disclosed.)*

5. PURPOSE OF DISCLOSURE

6. NAME AND ADDRESS OF PERSON OR AGENCY TO WHOM DISCLOSURE IS MADE

7. AUTHORITY FOR RELEASE OF INFORMATION *(Cite authority or applicable routine use no.)*

8. NAME AND TITLE OF VA EMPLOYEE MAKING THE DISCLOSURE